Session I Session III Session III

Paid	Paid	Paid
Entered in RW	Entered in RW	Entered in RW

for office use only



Talbot County Department of Parks and Recreation

Registration Form

PROGRAM INFORMATION			
	Session (if applicable)		
Level (if applicable)	Program Fee \$		
PARTICIPANT INFORMATION			
Last Name	First Name M.I		
Parent/Guardian (if applicable)			
Mailing Address			
City, State, Zip			
Home Phone	Work Phone		
E-mail Address	Cell Phone		
MF Date of Birth Age Grade School			
Medical Concerns			
PERMISSION FOR PHOTOGRAPH Occasionally, photographers will take photos of program p check below if you have a preference for the above name paYES, I give permission for the participantNO, I constitution.			
voluntarily agree to assume all such risk. I hereby release, discha and employees, harmless from and against any and all liability, or or description, including without limitation personal injuries an	It risk associated with this activity, including injury and death, and I arge, indemnify, and agree to told Talbot County, its officers, agents, laims actions, suits, damages, losses, or injuries of any kind, nature, and/or death, medical expenses, and economic damages arising or s) offered by the Talbot County Department of Parks and Recreation		
Signature	_ Date		